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APPLICATION NO.	FILED DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
160077.991	02/15/2002	Nikolae S. Nikolski	20385-60914	4154
23648	7940	01/28/2004		EXAMINER
BARNES & THORNBURG 11 SOUTH MERIDIAN INDIANAPOLIS, IN 46204			TRAN, LEN	
			ART UNIT	PAPER NUMBER
			1725	
DATE MAILED: 05/23/2004				

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary

Application No.	Applicant(s)
10/077,391	NIKOLOVSKI ET AL.
Examiner	Art Unit
Len Tran	1725

All participants (applicant, applicant's representative, PTO personnel):

(1) Len Tran. (3) _____

(2) Mr. Arland Stein. (4) _____

Date of Interview: 21 May 2004.

Type: a) Telephonic b) Video Conference
c) Personal [copy given to: 1) applicant
2) applicant's representative]

Exhibit shown or demonstration conducted: d) Yes e) No.
If Yes, brief description: _____

Claim(s) discussed: 1.

Identification of prior art discussed: _____.

Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.

Substance of interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant's argument regarding to the random dimples is convinced and non-final rejection is withdrawn.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.



Examiner's signature, if required